CLAIMS ONLY

Application Number	Filing Date
10710096	

Applicant(s)

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1	1					
2		1				
3						
4						
5						
6						
7		1				
8	1					
9						
10						
11						
12						
13						
14						
15		1				
16						
17						
18	1					
19		1				
20						
21						
22						
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24						
25		1				
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41						
42						
43						
44						
45						
46						
47						
48						
49						
50						
Total Indep	3					
Total Depend	22					
Total Claims	25					

CLAIMS	Indep	Depend	Indep	Depend	Indep	Depend
51						
52						
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99						
100						
Total Indep						
Total Depend						
Total Claims						